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TRANSMITTAL
FORM

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Total Number of Pages in This Submission

Application Number	10/027,157
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First Named Inventor	FULTON
Art Unit	3736
Examiner Name	Szmal, Brian Scott
Attorney Docket Number	032,290-007

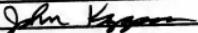
ENCLOSURES (Check all that apply)

 Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____ Landscape Table on CD After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below):

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name O'MELVENY & MYERS LLP

Signature 

Printed name John Kappos

Date September 26, 2007

Reg. No. 37,861

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Date September 26, 2007

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

I, Gerry Gressel, Assistant Secretary of Ethicon Endo-Surgery, Inc. and Artemis Medical, Inc., as representative of the Assignees of record of the entire interest of the applications listed below, hereby revoke all powers of attorney previously given and appoint the following attorneys and/or agents to prosecute and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent applications corresponding to the applications listed below, all of the registered practitioners identified by Customer Number 021884:

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2000 Duke Street
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(703) 920-1122

CERTIFICATE OF MAILING (37 C.F.R. §1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Please send all correspondence to the attention of John Welsh, at the above Customer Number, and direct all telephone calls to John Welsh at (703) 920-1122.

U.S. Serial No./ Patent No.	U.S. Filing Date	First-Named Inventor	Reel	Frame	Recordation Date	New Attorney Docket (Former Docket)
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U.S. Serial No./ Patent No.	U.S. Filing Date	First-Named Inventor	Reel	Frame	Recordation Date	New Attorne Docket (Former Docket)
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Assignees of interest: Ethicon Endo-Surgery, Inc.

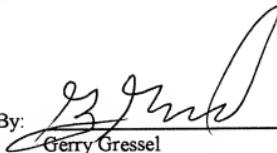
Artemis Medical, Inc.

Address: 4545 Creek Road
Cincinnati, OH 45242

In conformance with 37 C.F.R. §3.73(b), I hereby certify that all documents in connection with the chain of title have been reviewed, and to the best of my knowledge, all right, title and interest is in the above-identified Assignee.

Dated: 9/24/07

By:


 Gerry Gressel
 Assistant Secretary
 Ethicon Endo-Surgery, Inc.
 Assistant Secretary
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